

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF OHIO
WESTERN DIVISION

United States of America,
Plaintiff,

v.

Case No. 1:01cr061
(Hogan, MJ)

William Eastham,
Defendant.

ORDER APPOINTING COUNSEL

The Defendant has filed with this Court a financial affidavit which shows his/her inability to retain counsel.

Therefore, the Federal Public Defender, Esq., 2000 URS Center, 36 East Seventh Street, Cincinnati, Ohio 45202, 513-929-4834, is hereby appointed to represent the Defendant in this matter.

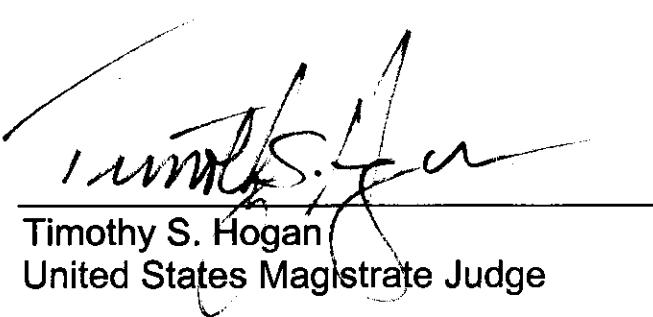
IT IS SO ORDERED.

11/15/04

Date

awh

November 15, 2004



Timothy S. Hogan
United States Magistrate Judge

FINANCIAL AFFIDAVIT

CJA 23
(Rev 5/98)

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)
IN THE CASE OF

U.S.

2004 NOV 15 PM 2:30
FOR *William Easton*
AT *U.S. Courthouse*

PERSON REPRESENTED (Show your full name)

*William Easton*CHARGE/OFFENSE (describe if applicable & check box →)
Supervised Release Violation Felony
 Misdemeanor

1 Defendant - Adult
 2 Defendant - Juvenile
 3 Appellant
 4 Probation Violator
 5 Parole Violator
 6 Habeas Petitioner
 7 2255 Petitioner
 8 Material Witness
 9 Other (Specify) _____

LOCATION NUMBER
_____DOCKET NUMBERS
Magistrate
District Court
Court of Appeals

EMPLOY- MENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self Employed		
	Name and address of employer: _____		
	IF YES, how much do you earn per month? \$ _____		
	If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	IF YES, how much does your Spouse earn per month? \$ _____		
ASSETS	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	RECEIVED	SOURCES	
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY \$ _____ THE SOURCES _____		
CASH	Have you any cash on hand or money in savings or checking account <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ _____		
PROP- ERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	VALUE	DESCRIPTION	
	IF YES, GIVE THE VALUE AND \$ _____ DESCRIBE IT _____		
OBLIGATIONS & DEBTS	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 5px; margin-right: 10px;">DEPENDENTS</div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 5px; margin-right: 10px;"> <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED </div> <div style="border: 1px solid black; padding: 5px; margin-right: 10px;">Total No. of Dependents _____</div> <div style="border: 1px solid black; padding: 5px;">List persons you actually support and your relationship to them <i>Daugh - - Does Not support</i></div> </div> </div>		
	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 5px; margin-right: 10px;">DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)</div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 5px; margin-right: 10px;">APARTMENT OR HOME: <i>N/A</i></div> <div style="display: flex; flex-wrap: wrap;"> <div style="border: 1px solid black; padding: 5px; margin-right: 10px; margin-bottom: 10px;">Creditors _____</div> <div style="border: 1px solid black; padding: 5px; margin-right: 10px; margin-bottom: 10px;">Total Debt \$ _____</div> <div style="border: 1px solid black; padding: 5px; margin-right: 10px; margin-bottom: 10px;">Monthly Payt. \$ _____</div> </div> </div> </div>		

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) _____

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)*William Easton*